

03/25/09

17W

Atty. Dkt. No. 093397-0401

## IN THE UNITED STATES PATENT AND TRADEMARK OFFICE

Applicant:

Geoffrey W. Krissansen

Title:

**CANCER THERAPY** 

Appl. No.:

10/014,887

International

6/14/2000

RECEIVED

Filing Date: 371(c) Date:

12/11/01

MAR 3 1 2009

OFFICE OF PETITIONS

Examiner:

Lei Yao

Art Unit:

1642

Confirmation

2382

Number:

CERTIFICATE OF EXPRESS MAILING

1 hereby certify that this correspondence is being deposited with the United States Postal Service's "Express Mail Post Office To Addressee" service under 37 C.F.R. § 1.10 on the date indicated below and is addressed to: Commissioner for Patents, P.O. Box 1450, Alexandria, VA 22313-1450.

EM 200054070 US 3/23/2009

(Express Mail Label Number) (Date of Deposit)

OSCAT Valdivia

(Printed Name)

## CHANGE IN STATUS TO LARGE ENTITY AND SUBMISSION OF FEE DEFICIENCY

Commissioner for Patents P.O. Box 1450 Alexandria, VA 22313-1450

Sir:

Applicants submit herewith a request to change the status of the above-identified application to Large Entity; and payment of the fee deficiency for the change from Small Entity to Large Entity. In accordance with 37 CFR § 1.28(c), the erroneous assertion of small entity status and payment of small entity fees upon the filing of the application were done in good faith, and without deceptive intent. The deficiency in payment is calculated in the tables below:

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## Supplemental Amendment to Final Office Action and Request For Continued Examination fees paid at time of filing (October 21, 2008):

	Claims	Previously	Extra Claims					Additional
	As Amended	Paid For		Present		Rate		Claims Fee
RCE Fee						\$810.00	=	\$810.00
1.17(e):								•
Total Claims:	33	- 88	=	.0	х	\$52.00	=	\$0.00
Independent Claims:	3	- 5	=	0	X	\$220.00	=	\$0.00
				CLAIM	S FE	E TOTAL	=	\$810.00
[X] Extension	for response filed	l within the thir	d month	ı:	5	51,110.00		\$0.00
			· E	XTENSION	FEE	TOTAL:		0
CLAIMS & EXTENSION FEE TOTAL:						-	\$1920.00	
[ X ]	Small Entity Fees Apply (subtract ½ of above):						\$960.00	
[X]	X ] Supplemental Information Disclosure Statement - 1.17(p):						_	\$0.00
					TOT	AL FEE:		\$960.00

## Fees that were due at time of filing:

	Claims As Amended		Previously Paid For		Extra Claims Present		Rate		Additional Claims Fee
RCE Fee							\$810.00	=	\$810.00
1.17(e):									
Total Claims:	33	-	88	=	0	х	\$52.00	=	\$0.00
Independent Claims:	3	-	5	=	0	x	\$220.00	=	\$0.00
					CLAIMS	S FE	E TOTAL	=	\$810.00

\$0.00	\$1,110.00	Extension for response filed within the third month:			
	ION FEE TOTAL:	EXTEN			
\$1920.00	ION FEE TOTAL:	CLAIMS & EXTEN			
\$0.00	btract ½ of above):	Small Entity Fees Apply (subtract ½ of above):			
\$0.00	tatement - 1.17(p):	] Supplemental Information Disclosure			
\$1920.00	TOTAL FEE:				

Further, to place this paper in compliance with 37 CFR § 1.28(c)(2)(ii), the deficiencies in payment are itemized below:

Type of Fee	Small Entity Fee Paid 10/21/08	Large Entity Fee Due	Amount of Deficiency
Request For Continued Examination (RCE) Fee 1.17(e):	\$405.00	\$810.00	\$405.00
Extension for response filed within the third month:	\$555.00	\$1,110.00	\$555.00
		Total Deficiencies Paid with this Submission =	\$960.00

A credit card payment form in the amount of \$960.00 to cover the above-identified deficiencies in fees paid October 21, 2008 is enclosed.

The Commissioner is hereby authorized to charge any additional fees which may be required regarding this application under 37 C.F.R. §§ 1.16-1.17, or credit any overpayment, to Deposit Account No. 19-0741. Should no proper payment be enclosed herewith, as by the credit card payment form being unsigned, providing incorrect information resulting in a rejected credit card

transaction, or even entirely missing, the Commissioner is authorized to charge the unpaid amount to Deposit Account No. 19-0741.

Please direct all correspondence to the undersigned attorney or agent at the address indicated below.

Date March 23, 2009

FOLEY & LARDNER LLP

Customer Number: 38706 Telephone: (650) 251-1129

Facsimile: (650)

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Respectfully submitted,

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